

JUN 29 2005

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

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**Commissioner for Patents**  
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless specified below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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20995 7590 03/28/2005

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06/30/2005 FFANAI3 00000044 10685068

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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

**John M. Grover, 42,610** (Depositor's name)  
 \_\_\_\_\_ (Signature)  
**JUNE 28, 2005** (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/685,068	10/14/2003	Bryan Patrick Flaherty	MASIBP.010C2	4370

TITLE OF INVENTION: RAPID NON-INVASIVE BLOOD PRESSURE MEASURING DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	06/28/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
NASSER, ROBERT L	3736	600-485000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Knobbe, Martens, Olson & Bear, LLP**  
 2 \_\_\_\_\_  
 3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**Masimo Corporation**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**40 Parker**  
**Irvine, CA 92618**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number **11-1410** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature **John M. Grover, 42,610**

Date \_\_\_\_\_

Typed or printed name \_\_\_\_\_

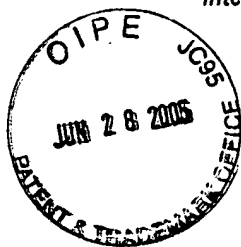
Registration No. **42,610**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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# Knobbe Martens Olson & Bear LLP

Intellectual Property Law



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Alexandria, VA 22313-1450

## CERTIFICATE OF MAILING BY "EXPRESS MAIL"

Attorney Docket No. : MASIBP.010C2  
Applicant(s) : Flaherty, et al.  
For : RAPID NON-INVASIVE BLOOD PRESSURE  
MEASURING DEVICE  
Attorney : John M. Grover  
"Express Mail" Label No. : EV 307966618 US  
Date of Deposit : June 28, 2005

I hereby certify that the accompanying

Transmittal letter; Issue Fee Transmittal (PTOL-85B); Check for Filing Fee;  
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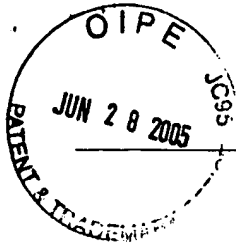
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**PATENT**

Case Docket No. MASIBP.010C2

Date: June 28, 2005

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s) : Flaherty, et al.  
Appl. No. : 10/685,068  
Filed : October 14, 2003  
For : RAPID NON-INVASIVE  
BLOOD PRESSURE  
MEASURING DEVICE  
Group Art Unit : 3736  
Class/Sub-Class: 600-485000  
Examiner : Robert L. Nasser

Confirmation No. : 4370

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June 28, 2005

(Date)

John M. Grover, Reg. No. 42,610

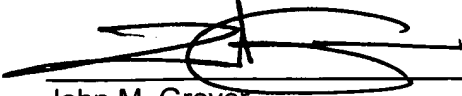
**TRANSMITTAL LETTER**

**MAIL STOP ISSUE FEE**  
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Dear Sir:

Enclosed for filing is the Issue Fee for the above-identified application:

- (X) Form PTOL-85.
- (X) A check in the amount of \$1,000 to cover the issue fee and publication fee is enclosed.
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Account No. 11-1410.
- (X) Return prepaid postcard.

  
John M. Grover  
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Attorney of Record  
Customer No. 20,995  
(949) 760-0404